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Invited Commentary

Diving deep: Taking a look at our own bias in academic medicine



Thank you for the opportunity to comment in such well-written article. This manuscript presents data about the current state of underrepresentation of women as conference speakers, particularly in plenary roles.¹

Developing, retaining, and promoting female talent is a priority in academic medicine. We have been able to recruit women to the field of medicine and surgery; however, we still have some work to do offering opportunities to females so they can become leaders in organizations and fulfill their best potential.^{2,3} Worldwide, there is a gap when we look at the percentage of full professors and leaders of institution and organizations regarding female gender and other minorities.^{2,3}

Some formal and informal patterns of influence play a role in extending opportunities to surgeon women leaders. To ensure organizations have a diverse group of leaders and lectures it is important to understand the implicit bias that exist, instead of negating it.^{4,5} We need comprehend the ways that unconscious bias in the organization affects opportunities and motivation for everyone.⁶ A significant impediment to increasing gender diversity is the belief that our institutions are true meritocracies. It is important to take a detail look at the structural impediments for the advancement of women in leadership as well as for other minorities.

For any minority it is indispensable to gain credibility and to negotiate wisely this includes but is not limited to managing up as well as helping others that are in the pipeline.² During the path of success, it is crucial for women to be intentional about the career opportunities they seek. For the mentors and sponsors who are providing these opportunities, it is pivotal they share the same intentionality in order to reach the desire outcome.²

Every point of view brings a different perspective, this would enrich the discussion and help to rise to the challenges that we currently face in medicine. Gender and ethnicity should not be

factors when deciding in academic expertise and leadership skills. However, by having such a wide gap between genders and minorities in positions of influence in academic medicine, we contribute to the unbalance in power.

It is the responsibility of all us, and especially of those that are currently possess some influence in making a change, to improve diversity, inclusion and more importantly equity in the field of medicine.

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Paula Ferrada

VCU Surgery Trauma, Critical Care and Emergency Surgery, PO Box 980454, West Hospital, 15th Floor, East Wing, 1200 E, Broad St, Richmond, VA, 23298-0454, USA

E-mail address: pferrada@mcvh-vcu.edu.